

**Patient Care Encounter (PCE)  
V. 1.0 Installation Guide  
August 1996**

**Introduction**

Related Manuals

**Installation and Implementation Checklist**

**Pre-Installation**

Namespaces

Resource Requirements

Required/Recommended Software to be Installed before PCE

Global Maximum Limit

Global List

Files Installed by PCE

Routines Installed

Special Considerations

Recommended Time for Installation

Scanned Encounter Form Data

Estimated Installation Time

**Installation Instructions**

**Post-Installation-PCE and Visit Tracking Set-up**

**Appendix A - Visit Creation Activation Levels**

**Appendix B - Orientation of MAS Staff to PCE**

# Introduction

Patient Care Encounter (PCE) V. 1.0 facilitates the collection, management, and display of outpatient encounter data, including providers, procedure codes, and diagnostic codes, in compliance with the October 1, 1996 mandate from the Undersecretary of Health. PCE also enables the documentation of patient education, examinations, treatments, skin tests, and immunizations, as well as the collection and management of other clinically significant data, including the defining of Health Factors and Health Maintenance Reminders to be displayed on Health Summaries. Other summary reports relating to encounters can be generated through PCE.

Visit Tracking V. 2.0 is a utility which enables the creation, editing, and deletion of encounters in the Visit file (9000010). Visit Tracking can be used by a variety of DHCP modules, with potential benefits for clinical, administrative, and fiscal applications. It allows DHCP to link patient encounter-related data across DHCP packages to an entry in the Visit file.

The *Patient Care Encounter (PCE)/Visit Tracking Installation Guide* is designed to provide VAMC IRM staff with the necessary technical information to install, set up, and maintain the PCE/Visit Tracking package.

## **Related Manuals**

*Patient Care Encounter V. 1.0 User Manual*

*Patient Care Encounter V. 1.0 Technical Manual*

*Automated Information Collection System (AICS) User Manual*

*Health Summary V. 2.7 User Manual*

# Installation and Implementation Checklist

NOTE: This checklist outlines the steps for installing and implementing PCE and Visit Tracking, to give you an overview and a checklist to work with. Be sure to read the more detailed instructions that follow in this manual, as well as in the *Patient Care Encounter Technical* and *User Manuals*.

## ***Pre-installation***

### ☐ **1.** Namespaces

PCE: PX

Visit Tracking: VSIT

### ☐ **2.** Ensure that you have adequate Resource Requirements.

**MSM SITES:** Increase your Stack/Stap to 24k to avoid STKOV errors, and the size of your partitions to 85k for selected options to avoid PGMOV errors.

**DSM SITES:** Expand string length for data and global references to accommodate Standards and Conventions (SAC) 2.3.2.2 which extends the full evaluated length of a global reference to 200 characters. (Some sites have elected to perform these steps only for the **^TMP** and **^XTMP** globals, since those are the only globals for which PCE is known to require expanded strings and subscripts.)

### ☐ **3.** Make sure the required DHCP software packages are installed before you install PCE/Visit Tracking.

### ☐ **4.** Check your maximum global limit for the volume set. It must be able to accommodate the addition of 20 new globals. On Alphas, use the ^VOLMAN utility from the MGR UCI.

### ☐ **5.** Ensure proper global protection. To avoid protection errors, set the global protection for ^APPPCTRL( to READ, WRITE, and PURGE/DELETE. (This only applies to sites who have already installed PCE Patient/IHS Subset (PXPT).)

### ☐ **6.** Review files to be installed.

### ☐ **7.** Review routines to be installed.

- ❑ **8.** Note post-installation processes regarding the VISIT TRACKING PARAMETERS file, and routines included from other packages (AUPN from IHS, Health Summary patch #8, and SD-name spaced routines from patch 27 of Scheduling v. 5.3).
- ❑ **9.** We recommend that you install PCE/Visit Tracking first in a training or test account. Orient your MAS users to the differences they will see in options as a result of PCE/Scheduling integration (See Appendix B for details). Make sure all of the set-up works as intended before you install into production.
- ❑ **10.** Install PCE on a weekend or evening when clinic activity is minimal, to avoid visit creation and database errors during installation. Do a full back up on your system.
- ❑ **11.** Ensure that no scanned encounter form data is being uploaded into PCE during the installation.
- ❑ **12.** It takes approximately 15 minutes to install PCE on either MSM or DSM systems..

## ***Installation***

- ☐ **13.** Delete routines: PX\* and VSIT\*
- ☐ **14.** Verify that DUZ ("AG"), DT, DTIME , and U are defined, and DUZ(0)="@".
- ☐ **15.** Do ^XUP and select the Kernel Installation & Distribution System.
- ☐ **16.** Select the Installation menu option, then select the Load a Distribution option. At the prompt "Enter a Host File:" enter the directory and the filename PX1\_0.KID.
- ☐ **17.** Run the option "Verify Checksums in Transport Global" to verify that all routines have the correct checksum. If there are any discrepancies, do not run the Install Package(s) option. Instead, run the Unload a Distribution option to remove the Transport Global from your system. Call your IRM Field Office and report the problem.
- ☐ **18.** From the Installation Menu of the KIDS menu, run the option "Install Package(s)." Select the package 'VISIT' and proceed with install.
- ☐ **19.** On a mapped system, rebuild your map set.
- ☐ **20.** Move routines to all systems, as appropriate.
- ☐ **21.** Enable journaling for PCE and Visit Tracking globals.
- ☐ **22.** Use the KIDS Build File Print option if you would like a complete listing of package components (e.g., routines and options) exported with this software.
- ☐ **23.** Use the KIDS Install File Print option if you'd like to print out the results of the installation process.

## **❑ *Post-installation***

- ❑ **24.** Use the Visit Tracking Parameters Edit option to ensure that the entries in the VISIT TRACKING PARAMETERS file (150.9) are correct.
- ❑ **25.** Set PCE Site Parameters through the PCE Site Parameters option on the PCE Site Parameters Menu.
- ❑ **26.** Make sure that new Scheduling, Integrated Billing, PCE, and Visit Tracking EVENTS are on the appropriate ITEM protocols:
- ❑ **27.** Assign PCE menu and options.
- ❑ **28.** Set up a clinic for use with Dispositions. Define the Disposition Clinic in the PCE Parameters file (8.5).
- ❑ **29.** Review entries contained in PCE Supporting Files. Entries in each of the supporting files should be evaluated and assigned an appropriate status through the “Activate/Inactivate Table Items” option.
- ❑ **30.** Edit the report parameters using the *PCE Report Parameter Edit* option.
- ❑ **31.** Create PXCA PCE ERROR BULLETIN as a mail group in MAIL GROUP file (#3.8).
- ❑ **32.** Create VSIT CREATE ERROR as a mail group in MAIL GROUP file (#3.8).
- ❑ **33.** Activate PCE components in the Health Summary Component file.
- ❑ **34.** Implement the PCE Reminder/Maintenance items to appear on Health Summaries for each clinic. Also coordinate these with the Encounter Form designs for each clinic.
- ❑ **35.** (optional) Add Health Summary, Problem List, and Progress Notes as actions on PCE screens to allow quick access to those programs while using PCE.

# Pre-Installation

## 1. Namespaces

Patient Care Encounter: PX

Visit Tracking Namespace: VSIT

## 2. Resource Requirements

Patient Care Encounter is used as a clinical repository for data from many sources, including scanning devices such as PANDAS and TELEFORM, the Automated Information Collection System (AICS), the Graphical User Interface (GUI) physician workstation, and manual data entry options in Scheduling and PCE.

The table below lists estimated disk space requirements for PCE/Visit Tracking for four levels of facility complexity. Estimates are based on adding 83k to the database for every 100 encounters, where each encounter averages two procedures, one diagnosis, and one provider. Each visit averages 1.9 encounters, based on stop code reporting per visit transmitted to Austin.

Complexity Level	Average # of Ambulatory Visits/Year	Estimated Disk Space Requirements/Year
1	254,018	400mb
2	149,101	234mb
3	92,761	146mb
4	71,371	112mb

**MSM SITES:** Increase your Stack/Stap to 24k to avoid STKOV errors.

To avoid PGMOV errors, add an entry and exit action to dynamically increase/decrease the partition size for the following options:

```
Appointment Management [SDAM APPT MGT]
Appointment Check-in/Check-out [SDAM APPT CHECK IN/OUT]
Add/Edit Stop Codes [SDADDEDIT]
Check-in/Unsched. Vsit [SDI]
Make Appointment [SDM]
Multiple Appointment Booking [SDMULTIBOOK]
Disposition an Application [DG DISPOSITION APPLICATION]
Disposition Log Edit [DG DISPOSITION EDIT]
Entry action: S %K=85 D INT^%PARTSIZ
Exit action: S %K=40 D INT^%PARTSIZ
```

**DSM SITES:** Expand string length for data and global references to accommodate Standards and Conventions (SAC) 2.3.2.2 which extends the full evaluated length of a global reference to 200 characters. (Some sites have elected to perform these steps only for the **^TMP** and **^XTMP** globals, since those are the only globals for which PCE is known to require expanded strings and subscripts.)

Since the current default for maximum global reference length is 128 for DSM sites, do the following:

```
What UCI: MGR
YOU'RE IN UCI: MGR,DEV

>D ^VOLMAN
Volume Management Utilities

    1.  ADD                      (ADD^VOLMAN)
    2.  CREATE                  (CREATE^VOLMAN)
    3.  EXTEND                  (EXTEND^VOLMAN)
    4.  MAXIMUM GLOBALS        (MAXGLO^VOLMAN2)
    5.  STRING LENGTH          (EXPSTR^VOLMAN2)

Select Option > 5.  STRING LENGTH

Volume Set to set EXPANDED STRING LENGTH flag for > ^TMP

Expanded string length for data and global references is currently
DISALLOWED on this Volume Set:

    255 bytes is the maximum data length, and
    128 bytes is the maximum global reference length.

When you enable expanded strings and global references on a Volume Set,
then:

    512 bytes is the maximum data length, and
    249 bytes is the maximum global reference length.

*** WARNING *** Once you have enabled a Volume Set for use with expanded
strings and subscripts, that flag may NOT be reset.

Allow expanded string lengths on Volume Set ^TMP [Y OR N] ? <N> Y

Expanded string length is now ENABLED on Volume Set ^TMP.
```

**NOTE:** The new settings will not take effect until the DSM configuration is shut down and re-started on all nodes. Consult your DSM manuals for more information.



### 3. Required or Recommended Software to be installed before PCE

Package	Minimum Version	Required or Recommended	Comments
Kernel	8.0	Required	The NEW PERSON File Patch, XU*8*27, may also be installed prior to PCE.
VA FileMan	21	Required	
Patient Information Management System (PIMS)	5.3	Required	Completely patched.
Order Entry/Results Reporting (OE/RR)	2.5	Required	
Automated Information Collection System (AICS)	2.1	Required	Completely patched.
Health Summary	2.7	Recommended	Completely patched (including patch GMTS*2.7*8). You must have version 2.7 to use PCE components.
Problem List	2.0	Recommended	If you want to link diagnoses to problems, or to populate Problem List from encounter forms.
Clinical Lexicon	1.0	Recommended	For use with Problem List.
PCE Patient/IHS Subset (PXPT)	1.0	Required	PXPT's tasked job to synchronize the Patient file (2) with the Patient/IHS file (9000001) must be finished before you install PCE/Visit Tracking.

### 4. Global Maximum Limit

Twenty new globals are added to your system as a result of this install. Check your maximum global limit for the volume set. It must be able to accommodate the addition of 20 new globals. On Alphas, use the ^VOLMAN utility from the MGR UCI.

## 5. Global List

Below are lists of globals that will be installed and which **MUST** have proper global protection. To avoid protection errors, set the global protection for ^APPPCTRL( to READ, WRITE, and PURGE/DELETE. (This only applies to sites who have already installed PCE Patient/IHS Subset (PXPT).)

*Alpha cluster configuration (DSM):* the PCE and Visit Tracking Globals **must** be set and protected on the proper volume set using the %GLOMAN utility.

*486 configurations (MSM):* use the %GCH system utility to create and change globals and their attributes.

Each new global will need to have the global root set manually equal to null (S ^AUPNVSIT="").

On both Alpha, and 486 systems, all globals should be defined as follows for the install:

	System	World	Group	UCI/USER
<b>Alpha (DSM)</b>	RWP	RWP	RWP	RWP
<b>(MSM)</b>	RWD	RWD	RWD	RWD

## Journaling

**MSM:** should be enabled for all globals after the install is completed.

**DSM:** should be enabled for globals, as noted in the global lists on the next pages, after the install is completed.

## 6. Files Installed by PCE

The IHS/VA joint-sharing files installed by PCE include:

### Visit Tracking

File Name	File #	Global	Data	Journaling
Visit	9000010	^AUPNVSIT(	NO	ON
Ancillary DSS ID	150.1	^VSIT(150.1,	YES	
Visit Site Codes	150.2	^VSIT(150.2,	YES	
Visit Tracking Parameters	150.9	^DIC(150.9	Set in post-install	

## PCE

File Name	File #	Global	Data	Journaling
PCE Code Mapping	811.1	^PXD(811.1,	YES	
PCE Taxonomy	811.2	^PXD(811.2,	YES	
PCE Reminder Type	811.8	^PXD(811.8,	YES	
PCE Reminder/ Maintenance Item	811.9	^PXD(811.9,	YES	
PCE Parameters	815	^PX(815,	YES	
PXCA Device	839.01	^ PX(839.01,	NO	ON
Interface Module Errors				
Data Source	839.7	^ PX(839.7,	YES	
Patient/IHS	9000001	^AUPNPAT(	NO	ON
V Provider	9000010.06	^AUPNVPRV(	NO	ON
V POV	9000010.07	^AUPNVPOV(	NO	ON
V Immunization	9000010.11	^AUPNVIMM(	NO	ON
V Skin Test	9000010.12	^AUPNVSK(	NO	ON
V Exam	9000010.13	^AUPNVXAM(	NO	ON
V Treatment	9000010.15	^AUPNVTRT(	NO	ON
V Patient Ed	9000010.16	^AUPNVPED(	NO	ON
V CPT	9000010.18	^AUPNVCPT(	NO	ON
V Health Factors	9000010.23	^AUPNVHF(	NO	ON
Location	9999999.06	^AUTTLOC(	NO	
Education Topics	9999999.09	^AUTTEDT(	YES	ON
Immunization	9999999.14	^AUTTIMM(	YES	
Exam	9999999.15	^AUTTEXAM(	YES	
Treatment	9999999.17	^AUTTTRT(	YES	
Provider Narrative	9999999.27	^AUTNPOV(	NO	ON
Skin Test	9999999.28	^AUTTSK(	YES	
Health Factors	9999999.64	^AUTTHF(	YES	ON

**NOTE:** Sites using Kernel Part 3 (optional) need to set user access to these files. See the Security section of the *PCE Technical Manual* for information.

### Other DHCP files used by Patient Care Encounter (PCE):

File Name	File #	Global	Comment
Eligibility	8	^DIC(8	
New Person	200	^VA(200	
Clinic Stop	40.7	^DIC(40.7	
Hospital	44	^SC(	
Location			
Expressions	757.01	^GMP(757.01	Clinical Lexicon install not required
ICD Diagnosis	80	^ICD9(	
ICD Operation/ Procedure	80.1	^ICD0(	
Problem	9000011	^AUPNPROB(	Problem List not required
Patient	2	^DPT(	
CPT	81	^ICPT(	

## 7. Routines Installed with this Version (four builds):

### *PCE Build*

AUPNPAT	AUPNSICD	AUTNPOV	IBDFPCE	PXAI	PXAICPT	PXAICPTV
PXAIHF	PXAIHFV	PXAIIMM	PXAIIMMV	PXAIPED	PXAIPEDV	PXA IPL
PXAIPOV	PXAIPOVV	PXAIPRV	PXAIPRVV	PXAISK	PXAISKV	PXAIUPRV
PXAIYST	PXAIYSTV	PXAIXAM	PXAIXAMV	PXAPI	PXAPIDEL	PXAPIEED
PXAPIIB	PXAPIUTL	PXBAICS	PXBAPI	PXBAPI1	PXBAPI2	PXBAPI21
PXBAPI22	PXBCC	PXBDCPT	PXBDPL	PXBDPOV	PXB DPRV	PXBDREQ
PXBDSTP	PXBDVST	PXBG CPT	PXBG CPT2	PXBG CPT4	PXBGHF	PXBGIMM
PXBG PED	PXBGPL	PXBGPL2	PXBGPOV	PXBGPOV2	PXBGPOV3	PXBGPOV4
PXBGPRV	PXBGPRV2	PXBGPRV3	PXBGPRV4	PXBGSK	PXBGSTP	PXBGSTP2
PXBGVST	PXBGXAM	PXBHLP0	PXBHLP1	PXBHLP2	PXBHLP3	PXBHLP4
PXBHLP R	PXBMCPT	PXBMCPT2	PXBMP OV	PXBMP RV	PXB MSTP	PXBPCPT
PXBPCPT1	PXBPL	PXB PPOV	PXB PPOV1	PXB PPRV	PXB PPRV1	PXB PQUA
PXB PSTP	PXB PSTP1	PXB PVST	PXB P WCH	PXBSTOR	PXBSTOR1	PXBUTL
PXBUTL0	PXBUTL1	PXBUTL2	PXBUTL3	PXCA	PXCA0	PXCACPT
PXCACPT1	PXCADX	PXCADXP1	PXCADXP2	PXCADXP L	PXB PVST	PXB P WCH
PXBSTOR	PXBSTOR1	PXBUTL	PXBUTL0	PXBUTL1	PXBUTL2	PXBUTL3
PXCA	PXCA0	PXCACPT	PXCACPT1	PXCADX	PXCADXP1	PXCADXP2
PXCADXP L	PXCAERR	PXCAHF	PXCAPED	PXCAPL	PXCAPL1	PXCAPL2
PXCAPOV	PXCAPOV1	PXCAPRV	PXCASK	PXCASOR	PXCATRT	PXCAVIMM
PXCAVST	PXCAVST1	PXCAVST2	PXCAXAM	PXCE	PXCEAE	PXCEAE1
PXCEAE2	PXCEAPPM	PXCECPT	PXCECSTP	PXCEDATE	PXCEE800	PXCEEXP
PXCEHELP	PXCEHF	PXCEHIST	PXCEHLOC	PXCEINTR	PXCENEW	PXCEPAT
PXCEPED	PXCEPOV	PXCEPOV1	PXCEPRV	PXCESDA1	PXCESDA3	PXCESDAM
PXCESIT	PXCESK	PXCETRT	PXCEVFI1	PXCEVFI2	PXCEVFI4	PXCEVFI5
PXCEVFIL	PXCEVIMM	PXCEVSIT	PXCEVST	PXCEXAM	PXEDIEL	PXEDIELU
PXEDILUD	PXEDIM	PXEDIP	PXIPENV	PXIPOST	PXIPOST1	PXIPREI
PXKCO	PXKCO1	PXKCO C	PXKCO C1	PXKCO DX	PXKCO DX1	PXKCOP
PXKCOV	PXKCOV1	PXKENC	PXKFCPT	PXKFCPT1	PXKFHF	PXKFIMM
PXKFIMM1	PXKF PED	PXKFPOV	PXKFPRV	PXKFSK	PXKFSK1	PXKFTRT
PXKFVST	PXKF XAM	PXKMAIN	PXKMAIN1	PXKMAIN2	PXKMASC	PXKMASC1
PXKVST	PXNTEG	PXNTEG0	PXPT	PXPTPOST	PXRHS01	PXRHS02
PXRHS03	PXRHS04	PXRHS05	PXRHS06	PXRHS07	PXRHS08	PXRHS12
PXRHS13	PXRHS14	PXRM	PXRMAFOP	PXRMAGE	PXRMCF	PXRMCFOP
PXRMCODE	PXRMDATE	PXRMDDEV	PXRMDGOP	PXRMDGPT	PXRMDISC	PXRMEDIT
PXRMEDU	PXRME XAM	PXRMFOUT	PXRMHF	PXRMHFOP	PXRMICD9	PXRIMM
PXRMLAB	PXRML OG	PXRMM EAS	PXRMOBES	PXRMPINF	PXRMPROB	PXRMPROC
PXRMPROP	PXRMP T	PXRMRAD	PXRMR AOP	PXRMR EDT	PXRMRINQ	PXRMSKIN
PXR MSTDC	PXRMTAXP	PXRMTEDT	PXRMTF	PXRMTFOP	PXRMTGOP	PXRMT P
PXR MTPA	PXRMTYPE	PXR MUNIQ	PXR MUTIL	PXR MVCOP	PXR MVCPT	PXR MVPOP
PXR MVPOV	PXR MWCHK	PXRRADUT	PXRRECQ	PXRRECSE	PXRRFDD	PXRRFDP
PXRRFDQ	PXRRFDSD	PXRRFDSE	PXRRGPRT	PXRRGUT	PXRRLC CP	PXRRLCD
PXRR LCHP	PXRRPCE	PXRRPCE1	PXRRPCE2	PXRRPCE3	PXRRPCE4	PXRRPCE5
PXRRPCEQ	PXRRPCR	PXRRPCR1	PXRRPCR2	PXRRPCR3	PXRRPCR4	PXRRPRD
PXRRPRDP	PXRRPRPL	PXRRPRSP	PXRRSC	PXSCH1	PXSCH2	PXSCH3
PXSCH4	PXTTEDC	PXTTEDE	PXTTEDQ	PXTTU1	PXUTL1	PXUTLSCC
PXUTLSTP	PXUTLVST	PXXDPT				

### *Visit Tracking 2.0 Build*

AUPNVSIT	VSIT	VSIT0	VSITASK	VSITBUL	VSITCK	VSITCK1	VSITDEF
VSITFLD	VSITGET	VSITHLP	VSITIENV	VSITIPOS	VSITIPRE	VSITKIL	
VSITNTEG	VSITOE	VSITPUT	VSITPUT1	VSITSTAT	VSITVAR	VSITVID	

### *Scheduling Patch 27 Build*

SDACS	SDAMBAE	SDAMBAE5	SDAMBAE6	SDAMEX1	SDAPI	SDAPIAE	
SDAPIAE0	SDAPIAE1	SDAPIAP	SDAPICO	SDAPICO1	SDAPIDP	SDAPIER	SDCO
SDCO1	SDCO2	SDCO3	SDCO4	SDCO5	SDCO6	SDCO9	SDCOAM
SDCODEL	SDPARM	SDPARM1	SDPARM2	SDPCE	SDPCE0	SDPCE1	SDPCE2
SDSTP	SDSTP2	SDSTP3	SDVSIT	SDVSIT0	SDVSIT2	SDYDPOST	SD YDPRE

### *Health Summary Patch GMTS\*2.7\*8 Build*

GMTSP8	GMTSPXEP	GMTSPXFP	GMTSPXHR	GMTSPXIM	GMTSPXOP	GMTSPXSK	GMTSPXTP
GMTSPXXP	GMTSVS	GMTSVSS					

## **8. Special considerations**

- A post-installation routine adds a default institution entry to the VISIT TRACKING PARAMETERS file (150.9).
- The post-installation process also checks to see if the VISIT TRACKING PARAMETERS file (150.9) has an entry. If not, it will configure it with default values. Review the Visit Tracking site parameters by using the Visit Tracking Parameters Edit option (See the PCE/Visit Tracking Setup section).
- The PCE and Visit Tracking packages export four AUPN prefix name spaced routines used within data dictionaries of the AUPN-prefixed globals: AUPNPAT, AUPNSICD, AUPNVSIT, and AUPNPOV.
- Sites must pick a date to begin using new Scheduling Checkout Interview prompts. This date has to be between the day after installation and October 1, 1996.
- Patch GMTS\*2.7\*8 is exported with PCE. This patch contains routines which accommodate Health Maintenance Reminder items and Clinical Reminder components in Health Summary v. 2.7.
- The SD-name spaced routines exported by PCE comprise patch 27 of Scheduling v. 5.3. These routines are required to support the integration of PCE and Scheduling functionality.

**9. Orient your MAS users to changes** in Appointment Manager and Disposition functionality. See Appendix B for details.

**10. Recommended time for installation**

We recommend that you install PCE/Visit Tracking on a weekend or evening when clinic activity is minimal, to avoid visit creation and database errors. It is not necessary to take users off the system, but you should do a full back-up before installing. You may want to disable specified options during the installation.

**11. Scanned encounter form data**

Ensure that no scanned form data is being uploaded into PCE during the installation.

**12. Estimated Installation Time**

It takes approximately 15 minutes to install PCE/Visit Tracking on either MSM or DSM systems.

# Installation Instructions

We recommend that you install PCE/Visit Tracking first in a training or test account. Orient your MAS users to the differences they will see in options as a result of PCE/Scheduling integration. Make sure all of the set-up works as intended and your users are familiar with the changes before you install into production.

**13.** Delete PX\* and VSIT\* routines:

**14.** Verify that DUZ ("AG"), DT, DTIME , and U are defined, and DUZ(0)="@".

**Installation.** PCE uses the KIDS utility to install its routines, files, and data. We don't recommend tasking this install because the post-install steps must be done before PCE and Scheduling will work.

**15.** Do ^XUP and select the Kernel Installation & Distribution System.

```
>D ^XUP
Setting up programmer environment
Access Code:
Terminal Type set to: C-VT100

Select OPTION NAME: KERNEL INSTALLATION & DISTRIBUTION  XPD MAIN    Kernel
Installation & Distribution System

    Edits and Distribution ...
    Utilities ...
    Installation ...

Select Installation & Distribution System Option: Installation
```

**16.** Select the Installation menu option, then select the Load a Distribution option. At the prompt "Enter a Host File:" enter your directory name and the filename PX1\_0.KID.

```
Select Installation & Distribution System Option: Installation
    Load a Distribution
    Print Transport Global
    Compare Transport Global to Current System
    Install Package(s)
    Restart Install of Package(s)
    Unload a Distribution
    Backup a Transport Global
Select Installation Option: L Load a Distribution
Enter a Host File: (directory name)PX1_0.KID
```

**17.** Run the option "Verify Checksums in Transport Global" to verify that all routines have the correct checksum. If there are any discrepancies, do not run the Install Package(s) option. Instead, run the Unload a Distribution option to remove the Transport Global from your system. Call your IRM Field Office and report the problem.

**18.** From the Installation Menu on the KIDS menu, run the option "Install Package(s)." Select the package 'VISIT TRACKING 2.0' and proceed with the install.

If the installation aborts, run the Unload a Distribution option to remove the Transport Global from your system. Enter the name of each package separately when prompted for package name (i.e., Visit Tracking, PCE, Scheduling, etc.). Call your IRM Field Office and report the problem.

```
Select Installation & Distribution System Option: Installation
  Load a Distribution
  Print Transport Global
  Compare Transport Global to Current System
  Install Package(s)
  Restart Install of Package(s)
  Unload a Distribution
  Backup a Transport Global

Select Installation Option: INSTALL PACKAGE(S)
Select INSTALL NAME: VISIT TRACKING 2.0
```

When asked if you wish to disable options, disable PIMS options which allow editing of data stored in PCE files and PCE Data Entry options.

### *PIMS options*

<b>Option Name</b>	<b>Option Text</b>
DG ADMIT PATIENT	Admit a Patient
SDAM APPT MGT	Appointment Management
SDAM APPT CHECK IN/OUT	Appointment Check-in/Check-out
SD CANCEL APPOINTMENT	Cancel Appointment
SDI	Check-in/Unsched. Visit
SDAPPEND	Append Ancillary Test for Appt.
DG DISPOSITION APPLICATION	Disposition an Application
DG DISPOSITION EDIT	Disposition Log Edit
SDM	Make Appointment
SD MULTIBOOK	Multiple Appointment Booking



## PCE data entry options

Option Name	Option Text
PXCE ENCOUNTER DATA ENTRY	PCE Encounter Data Entry
PXCE ENCOUNTER ENTRY SUPER	PCE Encounter Data Entry - Supervisor
PXCE ENCOUNTER ENTRY & DELETE	PCE Encounter Data Entry and Delete
PXCE ENCOUNTER ENTRY NO DELETE	PCE Encounter Data Entry without Delete

**19.** On a mapped system, rebuild your map set. If you map scheduling, we suggest you map the following routines also:

AUPNVSIT	PXAPI	PXB*	PXK*	VSIT0	VSITCK	VSITCK1
VSITDEF	VSITFLD	VSITGET	VSITKIL	VSITPUT	VSITPUT1	VSITSTAT
VSITVAR	VSITVID					

**20.** Move PX\*, AU\*, and VSIT\*, and the GMTS, IB, and SD routines listed below to appropriate systems, according to your local configurations.

GMTSP8	GMTSPXEP	GMTSPXFP	GMTSPXHR	GMTSPXIM	GMTSPXOP	GMTSPXSK	
GMTSPXTP	GMTSPXXP	GMTSVS	GMTSVSS	IBDFPCE	SDACS	SDAMBAE	
SDAMBAE5	SDAMBAE6	SDAMEX1	SDAPI	SDAPIAE	SDAPIAE0	SDAPIAE1	
SDAPIAP	SDAPICO	SDAPICO1	SDAPIDP	SDAPIER	SDCO	SDCO1	SDCO2
SDCO3	SDCO4	SDCO5	SDCO6	SDCO9	SDCOAM	SDCODEL	SDPARM
SDPARM1	SDPARM2	SDPCE	SDPCE0	SDPCE1	SDPCE2	SDSTP	SDSTP2
SDSTP3	SDVSIT	SDVSIT0	SDVSIT2	SDYDPOST	SDYDP RE		

**21.** Enable journaling for PCE and Visit Tracking globals.

See the global list in the pre-installation information for files using these globals:

^AUPNVSIT	^AUPNVPRV	^AUPNVPOV	^AUPNVIMM	^AUPNVSK	^AUPNVXAM	^AUPNVTRT
^AUPNVPED	^AUPNVCPT	^AUPNVHF	^AUTTEDT	^AUTTHF	^PX	

**22.** Use the KIDS Build File Print option if you would like a complete listing of package components (e.g., routines and options) exported with this software. You will need to print each build exported with PCE.

**23.** Use the KIDS Install File Print option if you'd like to print out the results of the installation process.

## **Installation Capture Example**

*This capture reflects an installation of PCE/VT/SD/HS into an account in which no previous version existed.*

```
>ZW DUZ
DUZ=2
DUZ(0)=@
DUZ(1)=
DUZ(2)=660
DUZ("AG")=V
DUZ("BUF")=1
DUZ("LANG")=

>D ^XUP

Setting up programmer environment
Terminal Type set to: C-VT220

Select OPTION NAME: XPD MAIN      Kernel Installation & Distribution System

    Edits and Distribution ...
    Utilities ...
    Installation ...

Select Kernel Installation & Distribution System Option: Installation

    Load a Distribution
    Print Transport Global
    Compare Transport Global to Current System
    Verify Checksums in Transport Global
    Install Package(s)
    Restart Install of Package(s)
    Unload a Distribution
    Backup a Transport Global

Select Installation Option: Load a Distribution
Enter a Host File: (DIRECTORY NAME) PX1_0.KID

KIDS Distribution saved on Aug 14, 1996@17:16:26
Comment: PCE v1.0, Visit Tracking v2.0, Scheduling v5.3*27 and Health
Summary v2.7*8

This Distribution contains Transport Globals for the following Package(s):
    VISIT TRACKING 2.0
    PCE PATIENT CARE ENCOUNTER 1.0
    SD*5.3*27
    GMTS*2.7*8

Want to Continue with Load? YES// [ENTER]
Loading Distribution...

Want to RUN the Environment Check Routine? YES// [ENTER]
Will first run the Environment Check Routine, VSITIENV

Will first run the Environment Check Routine, PXIPENV
```

Use VISIT TRACKING 2.0 to install this Distribution.

- Load a Distribution
- Print Transport Global
- Compare Transport Global to Current System
- Verify Checksums in Transport Global
- Install Package(s)
- Restart Install of Package(s)
- Unload a Distribution

Select Installation Option: **Verify** Checksums in Transport Global

Select INSTALL NAME: **VISIT TRACKING 2.0** Loaded from Distribution

8/14/96@17:37:50

=> PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary  
v2.7\*8 ;Created on Aug 14, 1996@17:16:26

DEVICE: HOME// **[ENTER]**

PACKAGE: VISIT TRACKING 2.0 Aug 14, 1996 1:39 pm

PAGE 1

-----  
22 Routine checked, 0 failed.

- Load a Distribution
- Print Transport Global
- Compare Transport Global to Current System
- Verify Checksums in Transport Global
- Install Package(s)
- Restart Install of Package(s)
- Unload a Distribution
- Backup a Transport Global

Select Installation Option: **Verify** Checksums in Transport Global

Select INSTALL NAME: **PCE PATIENT CARE ENCOUNTER 1.0** Loaded from

Distribution 8/14/96@17:37:50

=> PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary  
v2.7\*8 ;Created on Aug 14, 1996@17:16:26

DEVICE: HOME// **[ENTER]**

PACKAGE: PCE PATIENT CARE ENCOUNTER 1.0 Aug 14, 1996 1:39 pm

PAGE 1

-----  
301 Routine checked, 0 failed.

- Load a Distribution
- Print Transport Global
- Compare Transport Global to Current System
- Verify Checksums in Transport Global
- Install Package(s)
- Restart Install of Package(s)
- Unload a Distribution
- Backup a Transport Global

Select Installation Option: **Verify** Checksums in Transport Global

Select INSTALL NAME: **SD\*5.3\*27** Loaded from Distribution

8/14/96@17:37:50

=> PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary  
v2.7\*8 ;Created on Aug 14, 1996@17:16:26

DEVICE: HOME// **[ENTER]**

39 Routine checked, 0 failed.

Load a Distribution  
Print Transport Global  
Compare Transport Global to Current System  
Verify Checksums in Transport Global  
Install Package(s)  
Restart Install of Package(s)  
Unload a Distribution  
Backup a Transport Global

Select Installation Option: **Verify** Checksums in Transport Global

Select INSTALL NAME:      GMTS\*2.7\*8      Loaded from Distribution  
8/14/96@17:37:51  
=> PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary  
v2.7\*8 ;Created on Aug 14, 1996@17:16:26  
DEVICE: HOME// **[ENTER]**

11 Routine checked, 0 failed.

Load a Distribution  
Print Transport Global  
Compare Transport Global to Current System  
Verify Checksums in Transport Global  
Install Package(s)  
Restart Install of Package(s)  
Unload a Distribution  
Backup a Transport Global

Select Installation Option: **Install** Package(s)

Select INSTALL NAME: VISIT TRACKING 2.0      Loaded from Distribution  
8/14/96@17:37:50  
=> PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary  
v2.7\*8 ;Created on Aug 14, 1996@17:16:26

This Distribution was loaded on Aug 14, 1996@17:37:50 with header of  
PCE v1.0, Visit Tracking v2.0, Scheduling v5.3\*27 and Health Summary v2.7\*8  
;Created on Aug 14, 1996@17:16:26

It consisted of the following Install(s):

VISIT TRACKING 2.0  
PCE PATIENT CARE ENCOUNTER 1.0  
SD\*5.3\*27  
GMTS\*2.7\*8

Will first run the Environment Check Routine, VSITIENV

Install Questions for VISIT TRACKING 2.0

150.1      ANCILLARY DSS ID    (including data)

150.2      VSIT SITE CODES    (including data)

150.9 VISIT TRACKING PARAMETERS

9000010 VISIT

Will first run the Environment Check Routine, PXIPENV

Install Questions for PCE PATIENT CARE ENCOUNTER 1.0

357.69 TYPE OF VISIT (including data)

Note: You already have the 'TYPE OF VISIT' File.

I will MERGE your data with mine.

811.1 PCE CODE MAPPING (including data)

811.2 PCE TAXONOMY (including data)

811.8 PCE REMINDER TYPE (including data)

811.9 PCE REMINDER/MAINTENANCE ITEM (including data)

815 PCE PARAMETERS (including data)

839.01 PCE DEVICE INTERFACE MODULE ERRORS

839.7 PCE DATA SOURCE (including data)

9000001 PATIENT/IHS

Note: You already have the 'PATIENT/IHS' File.

9000010.06V PROVIDER

9000010.07V POV

9000010.11V IMMUNIZATION

9000010.12V SKIN TEST

9000010.13V EXAM

9000010.15V TREATMENT

9000010.16V PATIENT ED

9000010.18V CPT

9000010.23V HEALTH FACTORS

9999999.06LOCATION

Note: You already have the 'LOCATION' File.

9999999.09EDUCATION TOPICS (including data)

9999999.14IMMUNIZATION (including data)

9999999.15EXAM (including data)

9999999.17TREATMENT (including data)

9999999.27PROVIDER NARRATIVE

Note: You already have the 'PROVIDER NARRATIVE' File.

9999999.28SKIN TEST (including data)

9999999.64HEALTH FACTORS (including data)

This is the Institution that Patient entries in the PATIENT/IHS file (#9000001) will be associated with.

Select INSTITUTION:

Enter the date to start using the new Scheduling/PCE prompts.

All appointments/standalones on or after this date will use the new prompts. All appointments/standalones before this date will continue to use the old prompts.

Date: (8/15/96 - 10/1/96): **T+1** (AUG 15, 1996)

Install Questions for SD\*5.3\*27

43 MAS PARAMETERS (Partial Definition)

Note: You already have the 'MAS PARAMETERS' File.

44 HOSPITAL LOCATION (Partial Definition)

Note: You already have the 'HOSPITAL LOCATION' File.

Install Questions for GMTS\*2.7\*8

142.1 HEALTH SUMMARY COMPONENT (Partial Definition)

Note: You already have the 'HEALTH SUMMARY COMPONENT' File.

Want to DISABLE Scheduled Options, Menu Options, and Protocols? YES//

**[ENTER]**

Enter the Device you want to print the Install messages.

You can queue the install by enter a 'Q' at the device prompt.

Enter a '^' to abort the install.

DEVICE: HOME// PRINTER

Load a Distribution  
Print Transport Global  
Compare Transport Global to Current System  
Verify Checksums in Transport Global  
Install Package(s)  
Restart Install of Package(s)  
Unload a Distribution  
Backup a Transport Global

Select Installation Option: **[ENTER]**

Edits and Distribution ...  
Utilities ...  
Installation ...

Select Kernel Installation & Distribution System Option: **[ENTER]**

Do you really want to halt? YES// **[ENTER]**

Halting at 1:47 pm

>H

## **Printer Output**

```
Install Started for VISIT TRACKING 2.0 :  
    Aug 14, 1996@17:42:27  
  
Installing Routines:.....  
    Aug 14, 1996@17:42:29  
  
Running Pre-Install Routine: ^VSITIPRE.  
  
Installing Data Dictionaries: .....  
    Aug 14, 1996@17:42:38  
  
Installing Data: ..  
    Aug 14, 1996@17:42:44  
  
Installing PACKAGE COMPONENTS:  
  
Installing INPUT TEMPLATE..  
  
Installing PROTOCOL..  
    Located in the VSIT (VISIT TRACKING) namespace..  
  
Installing OPTION..  
    Aug 14, 1996@17:42:49  
  
Running Post-Install Routine: ^VSITIPOS..  
  
Looking at the VISIT TRACKING PRARMETERS file.  
I am going to add an entry to the DEFAULT INSTITUTION field #.04  
of the VISIT TRACKING PARAMETERS file.  
  
I am going to add an entry to the DEFAULT TYPE field #.03  
of the VISIT TRACKING PARAMETERS file.  
  
Set the Visit id in the Visit Tracking Parameters file  
if not already set  
  
Making sure that these protocols are not disabled.  
    VSIT PATIENT STATUS  
  
Updating Routine file.....  
  
Updating KIDS files.....  
  
VISIT TRACKING 2.0 Installed.  
    Aug 14, 1996@17:42:53  
  
Not a production UCI  
  
NO Install Message sent  
  
Install Started for PCE PATIENT CARE ENCOUNTER 1.0 :  
    Aug 14, 1996@17:42:53  
  
Installing Routines:.....  
    Aug 14, 1996@17:43:28  
  
Running Pre-Install Routine: ^PXIPREI.
```





```
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
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Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..  
Located in the PX (PCE PATIENT CARE ENCOUNTER) namespace..
```

Installing LIST TEMPLATE.....

Installing OPTION.....  
Aug 14, 1996@17:45:14

Running Post-Install Routine: ^PXIPOST..

Populating the LOCATION File #9999999.06 from the Institution File.

Populating the PXPT fields of the PCE PARAMETERS file (#815)

Now remove the old PCC MASTER CONTROL file (#90010 00)

Adding items to PXCE SDAM LIST MENU protocol.

```
SDAM LIST CHECKED IN  
SDAM LIST NO SHOWS  
SDAM LIST ALL  
SDAM LIST NO ACTION  
SDAM LIST CANCELLED  
SDAM LIST FUTURE  
SDAM LIST INPATIENT  
SDAM LIST NON-COUNT  
SDAM LIST CHECKED OUT
```

Adding items to PXCE MAIN HIDDEN ACTIONS protocol.

- VALM NEXT SCREEN
- VALM PREVIOUS SCREEN
- VALM UP ONE LINE
- VALM DOWN A LINE
- VALM REFRESH
- VALM PRINT SCREEN
- VALM PRINT LIST
- VALM RIGHT
- VALM LEFT
- VALM TURN ON/OFF MENUS
- VALM SEARCH LIST
- VALM LAST SCREEN
- VALM FIRST SCREEN
- VALM GOTO PAGE
- VALM BLANK 2
- VALM BLANK 3
- VALM BLANK 4

Adding items to PXCE ADD/EDIT HIDDEN protocol.

- VALM NEXT SCREEN
- VALM PREVIOUS SCREEN
- VALM UP ONE LINE
- VALM DOWN A LINE
- VALM REFRESH
- VALM PRINT SCREEN
- VALM PRINT LIST
- VALM RIGHT
- VALM LEFT
- VALM TURN ON/OFF MENUS
- VALM SEARCH LIST
- VALM LAST SCREEN
- VALM FIRST SCREEN
- VALM GOTO PAGE
- VALM BLANK 2

Adding item to PXCE GMTS HS ADHOC protocol.

Adding item to PXCE GMPL OE DATA ENTRY protocol.

Adding item to PXCE GMRP REVIEW SCREEN protocol.

Making sure that these protocols are not disabled.

- PXCA DATA EVENT
- PXCE ADD/EDIT
- PXCE ADD/EDIT DISPLAY BRIEF
- PXCE ADD/EDIT DISPLAY DETAIL
- PXCE ADD/EDIT HIDDEN
- PXCE ADD/EDIT INTERVIEW
- PXCE ADD/EDIT KNOWN ENCOUNTER
- PXCE ADD/EDIT MENU
- PXCE ADD/EDIT PATIENT CHANGE
- PXCE ADD/EDIT STOP CODE
- PXCE BLANK 1
- PXCE BLANK 2
- PXCE BLANK 3
- PXCE BLANK 4
- PXCE BLANK HS

PXCE BLANK PL  
PXCE BLANK PN  
PXCE BLANK SELECT NEW PATIENT  
PXCE CHANGE CLINIC STOP  
PXCE CHANGE HOSPITAL LOCATION  
PXCE CPT ADD  
PXCE DATE CHANGE PXCE DELETE V-FILE  
PXCE DISPLAY DETAIL  
PXCE EDIT V-FILE  
PXCE ENCOUNTER EDIT  
PXCE ENCOUNTER LIST  
PXCE EXAM ADD  
PXCE GMPL OE DATA ENTRY  
PXCE GMRP REVIEW SCREEN  
PXCE GMTS HS ADHOC  
PXCE HEALTH FACTORS ADD  
PXCE HISTORICAL ENCOUNTER  
PXCE HOSPITAL LOCATION VIEW  
PXCE IMMUNIZATION ADD  
PXCE INTERVIEW  
PXCE MAIN HIDDEN ACTIONS  
PXCE MAIN MENU  
PXCE NEW ENCOUNTER  
PXCE PATIENT CHANGE  
PXCE PATIENT ED ADD  
PXCE POV ADD  
PXCE PROVIDER ADD  
PXCE QUIT  
PXCE QUIT COMPLETELY  
PXCE SDAM DISPLAY DETAIL  
PXCE SDAM EXPAND  
PXCE SDAM INTERVIEW  
PXCE SDAM LIST  
PXCE SDAM LIST MENU  
PXCE SDAM MENU  
PXCE SDAM STANDALONE  
PXCE SDAM UPDATE ENCOUNTER  
PXCE SKIN TEST ADD  
PXCE TREATMENT ADD  
PXK CPT-SCH TO V-CPT  
PXK SDAM TO V-FILES  
PXK VISIT DATA EVENT

Recompile protocol menus used by List Manager.

PXCE MAIN MENU  
PXCE MAIN HIDDEN ACTIONS  
PXCE SDAM MENU  
PXCE SDAM LIST MENU  
PXCE ADD/EDIT MENU  
PXCE ADD/EDIT HIDDEN..

Add "PXR" Application Group to file 60, 71, 120.51  
Done only if not there already.

Adding "PXR" Application Group to ^DIC(60,

Adding "PXR" Application Group to ^DIC(71,

```

Adding "PXRM" Application Group to ^DIC(120.51,
Activate the selection package interfaces in AICS for PCE
Add "PXRS" Application Group to file 80, 80.1, 81
    Done only if not there already.
Adding "PXRS" Application Group to ^DIC(80,
Adding "PXRS" Application Group to ^DIC(80.1,
Adding "PXRS" Application Group to ^DIC( 81,.
Attach other packages' protocol to PCE's protocols.
    Adding protocol IBDF PCE EVENT to extended action protocol PXCA DATA EVENT
    ... already there
    Adding protocol IBDF PCE EVENT to extended action protocol PXK VISIT DATA
EVENT
    ... already there..
Deleting old package file entries & Deleting old Order Parameters.
    Deleting Package ++ PCE PATIENT/IHS SUBSET.
Populating the Patient/IHS File #9000001 via the following queued job ...
The job is task # 12691
Updating Routine file.....
Updating KIDS files.....
PCE PATIENT CARE ENCOUNTER 1.0 Installed.
    Aug 14, 1996@17:46:29
Not a production UCI
NO Install Message sent
Install Started for SD*5.3*27 :
    Aug 14, 1996@17:46:30
Installing Routines:.....
    Aug 14, 1996@17:46:38
Running Pre-Install Routine: ^SDYDPRE.
>>> Deleting Provider screen on file 44 ...
Installing Data Dictionaries: ....
    Aug 14, 1996@17:46:47
Installing PACKAGE COMPONENTS:
Installing PROTOCOL....
    Located in the SD (SCHEDULING) namespace..
    Located in the SD (SCHEDULING) namespace..
    Located in the SD (SCHEDULING) namespace..
    Aug 14, 1996@17:46:54

```

```
Running Post-Install Routine: ^SDYDPOST.

>>> Enabling New CPT Protocols

Updating Routine file.....

Updating KIDS files.....

SD*5.3*27 Installed.
      Aug 14, 1996@17:47:01

Install Started for GMTS*2.7*8 :
      Aug 14, 1996@17:47:01

Installing Routines:.....
      Aug 14, 1996@17:47:03

Installing Data Dictionaries: ..
      Aug 14, 1996@17:47:06

Running Post-Install Routine: ^GMTSP8.
Adding VITAL SIGNS OUTPATIENT component to HEALTH SUMMARY COMPONENT (142.1)
file
.
Component Installed.

Adding VITAL SIGNS SELECTED OUTPAT. component to HEALTH SUMMARY COMPONENT
(142.1) file.
Component Installed.

Installing new components in AD HOC Health Summary.

Rebuilding Ad Hoc Summary.....
.....
Done.

Updating Routine file.....

Updating KIDS files.....

GMTS*2.7*8 Installed.
      Aug 14, 1996@17:47:14

Not a production UCI

NO Install Message sent
```

## Post-Installation - PCE and Visit Tracking Set-up

This section describes the basic steps for setting up PCE and Visit Tracking. As noted, not all of these actions will be necessary, depending on your site's preferences.

**24.** Use the Visit Tracking Parameters Edit option to ensure that the entries in the VISIT TRACKING PARAMETERS file (150.9) are correct. (This option is not on a menu—go through MenuMan to access it.) The post-installation routine ^VSITIPOS, which is called automatically by the installation process, checks to see if the VISIT TRACKING PARAMETERS file (150.9) has an entry. If not, it will configure it with default values.

- Answer the SITE PART OF VISIT ID prompt with TEST ACCOUNT if this is in your test or training account.

- Answer with the three-letter identifier for your facility if you are in production. NOTE: If the SITE PART OF VISIT ID is **not** entered, entries will not be created in the Visit file (9000010).

```
>D ^XUP
Select OPTION NAME: VSIT TRACKING PARM EDIT Visit Tracking Parameters edits.
Select VISIT TRACKING PARAMETERS NAME: 1
DEFAULT TYPE: VA// [ENTER]
DEFAULT INSTITUTION: Enter your institution name here
Select PACKAGE: PCE PATIENT CARE ENCOUNTER PX
    ...OK? Yes// [ENTER] (Yes)
    PACKAGE: PCE PATIENT CARE ENCOUNTER// [ENTER]
    ACTIVE FLAG: ON// [ENTER]
Select PACKAGE: SCHEDULING SD
    ...OK? Yes// [ENTER] (Yes)
    PACKAGE: SCHEDULING// [ENTER]
    ACTIVE FLAG: OFF// ON
Select PACKAGE: [ENTER]
SITE PART OF VISIT ID: ??
    This is a three letter identifier for this computer system that is
    unique in the VA, or "TEST" for a test account. This is appended after a
    "-" onto the sequence number to form the unique Visit Id in the VA
    system. It is important that this is set to the correct value and not
    changed.
Choose from:
    ALBANY, NY ALN
    ALBUQUERQUE, NM ALB
    ALEXANDRIA, LA ALX
    ALLEN PARK, MI ALL
    ALTOONA, PA ALT
    .
    .
Select VISIT TRACKING PARAMETERS NAME: [ENTER]
```

**25.** Set PCE Site Parameters through the PCE Site Parameters option located on the PCE Site Parameters Menu. Set your default view as Appointment or Encounter, and enter numbers for computing the offset dates – a number subtracted from today's date is the Beginning Patient Date Offset (e.g., -30) and a number added to today's date is the Ending Patient Date Offset (e.g., 1). Do not put in specific dates, but count backwards and forward from the current date.

The Multiple Primary Diagnosis prompt lets sites who use scanning devices choose whether to receive warnings and continue processing the data after the software denotes one primary diagnosis, or to receive errors and prevent the encounter from being processed if more than one diagnosis is listed as primary.

You can also view the switch-over date which determines when the Scheduling interface for checkouts and dispositions will be effective, and the Health Summary start date which determines the starting date for displaying PCE data on Health Summaries. We recommend that the Health Summary start date not be set earlier than the SD/PCE Switch-over date, because the accuracy and completeness of PCE data can't be guaranteed before that date.

```
Select PCE IRM Main Menu Option: SP  PCE Site Parameter Menu

SITE    PCE Site Parameters Edit
RPT     PCE HS/RPT Parameter Menu ...
DISP    PCE Edit Disposition Clinics

Select PCE Site Parameter Menu Option: SIT  PCE Site Parameters Edit

Select PCE PARAMETERS ONE: 1
STARTUP VIEW: APPOINTMENT// [ENTER]
BEGINNING PATIENT DATE OFFSET: -30//[ENTER]
ENDING PATIENT DATE OFFSET: 1//[ENTER]
BEGINNING HOS LOC DATE OFFSET: -7//[ENTER]
ENDING HOS LOC DATE OFFSET: 0//[ENTER]
RETURN WARNINGS: YES//[ENTER]
MULTIPLE PRIMARY DIAGNOSES: RETURN WARNING// ?
If errors are returned by the Device Interface then the whole encounter is
not processed.
  Choose from:
    0          RETURN WARNING
    1          RETURN ERROR
MULTIPLE PRIMARY DIAGNOSES: RETURN WARNING// [ENTER]
SD/PCE SWITCH OVER DATE: AUG 15,1996
HEALTH SUMMARY START DATE: SEP 1,1996

Select PCE PARAMETERS ONE: [ENTER]
```

**26.** Make sure that the following EVENTS are on the ITEM multiples of the appropriate protocols:

EVENT	PROTOCOL
SDAM PCE EVENT	ITEM multiple of the PXX VISIT DATA EVENT protocol
IBDF PCE EVENTS	ITEM multiple of the PXX VISIT DATA EVENT protocol
PXX SDAM TO V-FILES	ITEM multiple of the SDAM APPOINTMENT EVENTS protocol
IBDF PCE EVENTS	ITEM multiple of PXCA DATA EVENT protocol
VSIT PATIENT STATUS	ITEM multiple of DGPM MOVEMENT EVENTS protocol

***Example of EVENT placement on PROTOCOLS.***

```
>D P^DI

VA FileMan 21.0
Select OPTION: INQUIRE TO FILE ENTRIES

OUTPUT FROM WHAT FILE: PROTOCOL          (3091 entries)
Select PROTOCOL NAME: PXX VISIT DATA EVENT      VISIT RELATED DATA
ANOTHER ONE: SDAM APPOINTMENT EVENTS          Appointment Event Driver
ANOTHER ONE: PXCA DATA EVENT                PCE Device Interface Module's Data Event
ANOTHER ONE: DGPM MOVEMENT EVENTS....
STANDARD CAPTIONED OUTPUT? Yes// [ENTER]  (Yes)
Include COMPUTED fields:  (N/Y/R/B): NO// [ENTER] - No record number (IEN),
no Computed Fields

NAME: PXX VISIT DATA EVENT                ITEM TEXT: VISIT RELATED DATA
TYPE: extended action                     CREATOR: EATON,DENIS
DESCRIPTION:  This is a Protocol that PIMS can hook onto to find the
data that was collected by PCE using List Manager, Scanning etc.
PIMS has developed a protocol, SDAM PCE EVENT, which will use the visit
related data to do an auto-checkout.
ITEM: SDAM PCE EVENT
ITEM: IBDF PCE EVENT
EXIT ACTION: K PXXSPX                      ENTRY ACTION: S PXXSPX=1
TIMESTAMP: 56796,37384

NAME: SDAM APPOINTMENT EVENTS              ITEM TEXT: Appointment Event Driver
TYPE: extended action                     CREATOR: EATON,DENIS
PACKAGE: SCHEDULING
DESCRIPTION:  This extended action contains all the actions that need
to be performed when an action is taken upon an appointment, such as
checking in.

ITEM: ORU PATIENT MOVMT
ITEM: IBACM OP LINK                        SEQUENCE: 1
ITEM: DG MEANS TEST REQUIRED
ITEM: VAFED EDR OUTPATIENT CAPTURE
ITEM: SDAM LATE ENTRY                     SEQUENCE: 2
ITEM: RMPR SCH EVENT                      SEQUENCE: 3
ITEM: DVBA C&P SCHD EVENT                 SEQUENCE: 8
ITEM: PXX SDAM TO V-FILES
ENTRY ACTION: D ANC^SDVSIT2              TIMESTAMP: 56796,37371
```



NAME: PXCA DATA EVENT

ITEM TEXT: PCE Device Interface Module's Data Event

TYPE: extended action

CREATOR: EATON,DENIS

DESCRIPTION: This is the event point invoked by PCE Device Interface Module when it has not found any errors in the data passed to it. This makes the data available to other users of the data including users of any Local data that may be included.

ITEM: IBDF PCE EVENT

TIMESTAMP: 56796,37383

NAME: DGPM MOVEMENT EVENTS

ITEM TEXT: MOVEMENT EVENTS v 5.0

TYPE: extended action

CREATOR: SCHLEHUBER,PAMELA

PACKAGE: REGISTRATION

DESCRIPTION:

At the completion of a patient movement the following events take place through this option:

1. The PTF record is updated when a patient is admitted, discharged or transferred.
2. The appointment status for a patient is updated to 'inpatient' for admissions and 'outpatient' for discharges. Admissions to the domiciliary have an 'outpatient' appointment status.
3. When a patient is admitted, dietetics creates a dietetic patient file entry and creates an admission diet order. When a patient is discharged, all active diet orders are discontinued. If a patient is absent or on pass, the diet orders are suspended.
4. Inpatient Pharmacy cancels all active orders when a patient is admitted, discharged or on unauthorized absence. A patient can not be given Unit Dose meds unless s/he is admitted to a ward. The patient can receive IV meds; however. When a patient is transferred, an inpatient system parameter is used to determine whether or not the orders should be cancelled. When a patient goes on authorized absence, the inpatient system parameter is used to determine whether the orders should be cancelled, placed on hold or no action taken. When a patient returns from authorized absence any orders placed on hold will no longer be on hold.
5. With ORDER ENTRY/RESULTS REPORTING v2.2, MAS OE/RR NOTIFICATIONS may be displayed to USERS defined in an OE/RR LIST for the patient. These notifications are displayed for admissions and death discharges.

FILE LINK: 11754;DIC(19,

ITEM: ORU AUTOLIST

ITEM: ORU PATIENT MOVMT

ITEM: FHWMA

ITEM: GMRVOR DGPM

ITEM: PSJ OR PAT ADT

ITEM: IB CATEGORY C BILLING

SEQUENCE: 10

ITEM: DG MEANS TEST DOM

SEQUENCE: 8

ITEM: DGJ INCOMPLETE EVENT

SEQUENCE: 6

ITEM: DGOERR NOTE

SEQUENCE: 7

ITEM: DGPM TREATING SPECIALTY EVENT

SEQUENCE: 1

ITEM: VAFED EDR INPATIENT CAPTURE

ITEM: SD APPT STATUS

SEQUENCE: 2

```
ITEM: GMRADGPM MARK CHART
ITEM: YS PATIENT MOVEMENT
ITEM: DVB ADMISSION HINQ
ITEM: VSIT PATIENT STATUS
    TIMESTAMP: 56803,40994
Select PROTOCOL NAME: [ENTER]
```

## 27. Assign PCE menus and options.

### PCE IRM Main Menu

SP	PCE Site Parameters Menu ...
TBL	PCE Table Maintenance ...
INFO	PCE Information Only ...
RM	PCE Reminder Maintenance Menu ...
CR	PCE Clinical Reports ...
HOME	Directions to Patient's Home Add/Edit
CO	PCE Coordinator Menu ...
CL	PCE Clinician Menu

- Assign the *PCE IRM Main Menu* to IRM staff or coordinators who will be responsible for setting up PCE, maintaining the entries in the PCE tables (such as Patient Education, Immunization, Treatments, etc.), and defining the clinical reminders/maintenance system for your site.
- Assign the *PCE Coordinator Menu* to the Application Coordinator(s) who will use all of the PCE options.

Assign data entry options on the Coordinator's Menu as follows:

- Assign *PCE Encounter Data Entry - Supervisor* to users who can document a clinical encounter and can also delete any encounter entries, even though they are not the creator of the entries. Users who have this option can also edit the Provider Narrative Category.
- Assign *PCE Encounter Data Entry* to data entry staff who can document a clinical encounter and who can delete their own entries.
- Assign *PCE Encounter Date Entry and Delete* to users who can document a clinical encounter and can also delete any encounter entries, even though they are not the creator of the entries.
- Assign *PCE Encounter Data Entry without Delete* to users who can document a clinical encounter , but should not be able to delete any entries, including ones that they have created.

- Assign the *PCE Clinician Menu* to clinicians who will be entering or editing data and using clinical reports.
- Assign *Directions to Patient's Home Add/Edit* to anyone who needs to enter directions to a patient's home-especially useful for Hospital-Based Home Care staff (directions can be viewed on Health Summaries).

**28.** Create a DISPOSITION CLINIC for each division in your facility using the "Set Up a Clinic" option on the Scheduling Supervisor Menu. If you are a multi-divisional facility and you want to credit disposition workload for each division, you will need to set up a DISPOSITION CLINIC for each division. Make sure you define each DISPOSITION CLINIC so that it is easily associated with the division for which you want to credit workload. See APPENDIX B in this manual for more detailed instructions.

- If you are a single-division facility, you should define only one DISPOSITION CLINIC.
- The DISPOSITION CLINICS will ONLY be used with Dispositions.
- PCE recommends creating a clinic defined as Disposition, with a Stop Code number of 102. This clinic should be used with all dispositions.

Define the DISPOSITION CLINIC in the PCE Parameters file (815), using the *PCE Edit Disposition Clinics* option..

**29.** Review entries contained in PCE Supporting Files: Data is exported for Education Topics, Examinations, Health Factors, Immunizations, Skin Tests, and Treatments.

Use the *Activate/Inactivate Table Items* option to review and assign an appropriate status for entries.

With the exception of "treatments," data is exported with a status of "active." Unless you activate current entries or create new entries for "Treatments," users will not be able to add treatments to an encounter.

### ***Example of activating Treatment items***

```
Select PCE Coordinator Menu Option: TBL PCE Table Maintenance
Select PCE Table Maintenance Option: ACT Activate/Inactivate Table Items
  E      Exams
  ET     Education Topics
  H      Health Factors
  I      Immunizations
  S      Skin Tests
  T      Treatments
Select Activate/Inactivate Table Items Option: T Treatments
Select TREATMENT NAME: WOUND CARE
INACTIVE FLAG: INACTIVE// ??
    This field is used to inactivate a treatment type. If this
    field contains a "1" then the treatment is inactive.
    Inactive treatments cannot be selected in the manual data
    entry process. Treatment entries should be made inactive when
    they are no longer used. Do not delete the entry or change
    the meaning of the treatment entry. To make an inactive
    treatment type active, enter the "@" symbol to delete the "1"
    from the field.
    Choose from:
      1          INACTIVE
INACTIVE FLAG: INACTIVE// @
Select TREATMENT NAME: Continue to enter treatments, as needed.
```

**30.** Edit the Report Parameters using the *PCE Report Parameter Edit* option. This option is used to define parameters that will be used by the PCE Report Module. You need to identify which clinics are considered Emergency Room clinics by clinicians. You also need to identify the lab test names that are used by your site to identify the following types of Lab tests: Glucose, Cholesterol, LDL Cholesterol, and HBA1C.

To get a printout of current definitions in the PCE Parameters fields for these fields, use the PCE HS/RPT Parameters Print.

## ***Example of editing report parameters***

```
Select PCE Coordinator Menu Option: parm  PCE HS/RPT Parameter Menu
  PRNT  PCE HS/RPT Parameters Print
  HS    PCE HS Disclaimer Edit
  RPT   PCE Report Parameter Edit
Select PCE HS/RPT Parameter Menu Option: RPT  PCE Report Parameter Edit
Select PCE PARAMETERS ONE: 1
Select ER CLINIC NAME: Triage
  Are you adding 'Triage' as a new REPORT ER CLINIC NAMES ( the 1ST for this
PCE PARAMETERS)? y  (Yes)
Select ER CLINIC NAME: [ENTER]
Select GLUCOSE NAMES: ?
  Answer with REPORT EMERGENCY CLINICS GLUCOSE NAMES
  You may enter a new REPORT EMERGENCY CLINICS, if you wish
  Enter the name(s) of the BLOOD GLUCOSE lab assays as they appear in
  the Laboratory Test (60) file . DO NOT INCLUDE Glucose Tolerance or
  Fluid Glucose test names.
  LAB TEST STORED ONLY AT THE "CH" NODE
  Answer with LABORATORY TEST NAME, or LOCATION (DATA NAME), or PRINT NAME
  Do you want the entire LABORATORY TEST List? n  (No)
Select GLUCOSE NAMES: glu
  1  GLUCAGON
  2  GLUCOSE
  3  GLUCOSE, OTHER
  4  GLUTAMINE
  5  GLUTETHIMIDE
TYPE '^' TO STOP, OR
CHOOSE 1-5:
  6  GLU URINE GLUCOSE
CHOOSE 1-6: 6  URINE GLUCOSE
```

Are you adding 'URINE GLUCOSE' as a new REPORT EMERGENCY CLINICS (the 1ST for this PCE PARAMETERS)? **y** (Yes)

Select GLUCOSE NAMES: **[ENTER]**

Select CHOLESTEROL NAMES: **??**

This field will contain the names of any and all TOTAL CHOLESTEROL assays as they appear in the Laboratory Test (60) file to allow the clinic reporting module of the Patient Care Encounter Package to monitor Quality of Care Markers. Entries should be made either by IRM personnel or the Clinical coordinator.

Select CHOLESTEROL NAMES: **chol**

- 1 CHOLESTEROL
- 2 CHOLESTEROL CRYSTALS
- 3 CHOLINESTERASE
- 4 CHOLYLGLYCINE

CHOOSE 1-4: **1**

Are you adding 'CHOLESTEROL' as a new REPORT CHOLESTEROL NAMES (the 1ST for this PCE PARAMETERS)? **y** (Yes)

Select CHOLESTEROL NAMES: **[ENTER]**

Select LDL CHOLESTEROL NAMES: **??**

This field will contain the names of any and all LDL CHOLESTEROL assays as they appear in the Laboratory Test (60) file to allow the clinic reporting module of the Patient Care Encounter Package to monitor Quality Assurance

Select LDL CHOLESTEROL NAMES: **CHOLYLGLYCINE**

Are you adding 'CHOLYLGLYCINE' as a new REPORT LDL CHOLESTEROL NAMES (the 1ST for this PCE PARAMETERS)? **y** (Yes)

Select LDL CHOLESTEROL NAMES: **[ENTER]**

Select HBA1C NAMES: **?**

Answer with REPORT HBA1C NAMES

You may enter a new REPORT HBA1C NAMES, if you wish  
Enter the name(s) of the Glycosolated Hemoglobin assays as they appear in the Laboratory Test (60) file.

LABS STORED ONLY AT THE "CH" NODE

Answer with LABORATORY TEST NAME, or LOCATION (DATA NAME), or

PRINT NAME Do you want the entire LABORATORY TEST List? **n** (No)

Select HBA1C NAMES: **glycosylated HEMOGLOBIN A1C**

Are you adding 'GLYCOSYLATED HEMOGLOBIN A1C' as a new REPORT HBA1C NAMES (the 1ST for this PCE PARAMETERS)? **y** (Yes)

Select HBA1C NAMES: **[ENTER]**

Select PCE PARAMETERS ONE: **[ENTER]**

**31. Create a PXCA PCE ERROR BULLETIN mail group in MAIL GROUP file (#3.8) and add at least one member. Then add this mail group to the MAIL GROUP field on the PXCA PCE ERROR BULLETIN bulletin.**

```
>D ^XUP
Setting up programmer environment
Terminal Type set to: C-VT220
Select OPTION NAME: XMEDITMG           Mail group edit
Mail group edit
Select MAIL GROUP NAME: PXCA PCE ERROR BULLETIN
  Are you adding 'PXCA PCE ERROR BULLETIN' as
    a new MAIL GROUP? Y (Yes)
    MAIL GROUP COORDINATOR: TEDD,DR
NAME: PXCA PCE ERROR BULLETIN  Replace
Select MEMBER: TEDD,DR
  Are you adding 'TEDD,DR' as a new MEMBER (the 1ST for this MAIL GROUP)? Y
(Yes)
Select MEMBER: [ENTER]
DESCRIPTION:
  1> [ENTER]
TYPE: PU public
ORGANIZER: TEDD,DR
COORDINATOR: TEDD,DR// [ENTER]
Select AUTHORIZED SENDER: [ENTER]
ALLOW SELF ENROLLMENT?: N NO
Select MEMBER GROUP NAME: [ENTER]
Select REMOTE MEMBERS: [ENTER]
Select DISTRIBUTION LIST: [ENTER]
Select MAIL GROUP NAME: [ENTER]

>D P^DI
VA FileMan 21.0

Select OPTION: ENTER OR EDIT FILE ENTRIES

INPUT TO WHAT FILE: BULLETIN
EDIT WHICH FIELD: ALL// MAIL GROUP           (multiple)
  EDIT WHICH MAIL GROUP SUB-FIELD: ALL// .01 MAIL GROUP
  THEN EDIT MAIL GROUP SUB-FIELD: [ENTER]
THEN EDIT FIELD: [ENTER]

Select BULLETIN NAME: PXCA PCE ERROR BULLETIN
Select MAIL GROUP: PXCA PCE ERROR BULLETIN           TEDD,DR
  Are you adding 'PXCA PCE ERROR BULLETIN' as
    a new MAIL GROUP (the 1ST for this BULLETIN)? Y (Yes)
Select MAIL GROUP: [ENTER]

Select BULLETIN NAME: [ENTER]

Select OPTION: [ENTER]
> H
```

**32.** Create VSIT CREATE ERROR as a mail group, as described above, adding appropriate members. Visit Tracking sends a message to this mail group when it has an error that prevents it from creating a visit

**33.** Activate PCE components in the Health Summary Component file. All the PCE components will need to be enabled, with the exception of PCE Measurements Non-Tabular and Measurements Selected. Once you rebuild your AD HOC Health Summary , all the enabled PCE Components plus the two new Vitals components, VITAL SIGNS OUTPATIENT and VITAL SIGNS SELECTED OUTPAT. will be selectable from the Ad Hoc Health Summary Type.

**34.** Implement the PCE Reminder/Maintenance items to appear on Health Summaries. The Clinical Reminders feature of PCE uses a combination of PCE Table Maintenance options, PCE Clinical Reminders options, PCE Taxonomy options, Health Summary Create/Modify Health Summary Type options, and AICS Encounter Form options.

Follow the steps starting below, as applicable, to implement Clinical Reminders:

**NOTE:** *Most of these steps are optional, to be performed to modify items to meet site needs.*

1) Use the *List Reminder Definitions* option to print the nationally distributed reminder definitions. As a rule, print both the "VA" and "VA-\*" prefixed reminder definitions, if available. Determine if you want to use the distributed definitions.

***Example of List Reminder Definitions (1st page)***

```
Select PCE Reminder Maintenance Menu Option: RL List Reminder Definitions
DEVICE: [ENTER] VAX RIGHT MARGIN: 80// [ENTER]

PCE REMINDER/MAINTENANCE ITEM LIST MAY 22,1996 08:57 PAGE 1
-----
BREAST CANCER SCREEN
-----
Print Name: Breast Cancer Screen
Related VA-* Reminder: 555002
Reminder Description:
    Mammogram should be given every 2 years to female patients, ages 50 -69.
    The "VA-*Breast Cancer Screen" reminder is based on the following
    "Breast Cancer Screen" guidelines specified in the "Guidelines for
    Health Promotion and Disease Prevention", M-2, Part IV, Chapter 9.
    Target Condition: Early detection of breast cancer.
    Target Group: All women ages 50 -69.
```



2) Identify the reminders that your site wants to implement. Copy, as necessary, using the *Copy Reminder Item* option. After copying the reminders, you will be able to alter the new reminders to meet your site's needs.

**NOTE:** The "VA-" prefix represents the nationally distributed set. When you copy items, the VA-prefix is dropped. "VA-\*" represents the minimum requirements as defined by the National Center for Health Promotion (NCHP). As an alternative, a local site reminder item can be created using the *Edit Taxonomy Item* option.

3) Use the Health Summary package to activate Clinical Reminders and Clinical Maintenance components. Then rebuild the Adhoc Health Summary Type.

- a. Identify which Health Summary Type is used by the implementing clinic.
- b. Add the Clinical Reminders and/or the Clinical Maintenance components to the Health Summary Type.
- c. Edit component parameters, identifying desired selection items.

4) If a taxonomy definition related to a reminder needs modification, do the following steps:

- a. Copy the taxonomy using the *Copy Taxonomy Item* option.
- b. Modify the taxonomy, using the *Edit Taxonomy Item* option.
- c. Copy the related Reminder.
- d. Modify the Reminder to reflect the newly created taxonomy, using the *Add/Edit Reminder Item* option.
- e. As an alternative, to copying a taxonomy, local site taxonomy items can be created, using the *Edit Taxonomy Item*.

5) Modify the Treatment, Immunization, Patient Ed, Skin Test, Exam, and Health Factors files, if necessary, through the *PCE Table Maintenance* option.

**NOTE:** If clinical reminders are not showing up correctly on Health Summaries, see the PCE User Manual, Appendix A-7, for troubleshooting information which IRM staff with programmer access can use.

6) Coordinate the use of Encounter Forms (through the AICS package) with the use of Health Summary Clinical Maintenance Components. Make sure that the relevant encounter forms contain all appropriate list bubbles for PCE data: Health Factors, Exams, Immunizations, Diagnosis, Patient Education, Procedures, and Skin Tests.

7) Inactivate reminders which will not be used, with the *Activate/Inactive Reminders* option.

**35 . (optional) Add Health Summary, Problem List, and Progress Notes as actions on PCE screens for quick access to those programs from PCE.**

```
>D P^DI
VA FileMan 21.0
Select OPTION: ENTER OR EDIT FILE ENTRIES
INPUT TO WHAT FILE: 101  PROTOCOL
                                     (2978 entries)
EDIT WHICH FIELD: ALL// ITEM
  EDIT WHICH ITEM SUB-FIELD: ALL// .01  ITEM
  THEN EDIT ITEM SUB-FIELD: MNEMONIC
  THEN EDIT ITEM SUB-FIELD: [ENTER]
THEN EDIT FIELD: [ENTER]
Select PROTOCOL NAME: PXCE SDAM MENU           Appointment Menu      AV
Select ITEM: PXCE BLANK HS// [ENTER]
  ITEM: PXCE BLANK HS// PXCE GMTS HS ADHOC           Health Summary      HS
  MNEMONIC: HS
Select ITEM: PXCE BLANK PN
  ...OK? Yes// [ENTER]  (Yes)
  ITEM: PXCE BLANK PN// PXCE GMRP REVIEW SCREEN       Progress Notes      PN
  MNEMONIC: PN
Select ITEM: PXCE BLANK PL
  ...OK? Yes// [ENTER]  (Yes)
  ITEM: PXCE BLANK PL// PXCE GMPL OE DATA ENTRY       Patient Problem List PL
  MNEMONIC: LP
Select ITEM: [ENTER]
Select PROTOCOL NAME: PXCE MAIN MENU
Select ITEM: PXCE BLANK HS// [ENTER]
  ITEM: PXCE BLANK HS// PXCE GMTS HS ADHOC           Health Summary      HS
  MNEMONIC: HS
Select ITEM: PXCE BLANK PN
  ...OK? Yes// [ENTER]  (Yes)
  ITEM: PXCE BLANK PN// PXCE GMRP REVIEW SCREEN       Progress Notes      PN
  MNEMONIC: PN
Select ITEM: PXCE BLANK PL
  ...OK? Yes// [ENTER]  (Yes)
  ITEM: PXCE BLANK PL// PXCE GMPL OE DATA ENTRY       Patient Problem List PL
  MNEMONIC: LP
Select ITEM: [ENTER]
Select PROTOCOL NAME: [ENTER]
```

## Appendix A - Visit Creation Activation Levels

Activation of the Visit Tracking package can occur at multiple levels. The following are examples of encounter creation scenarios:

- Creation of Primary encounters for appointments and standalones via manual data entry, scanned encounter forms, and data passed to PCE/Visit Tracking from ancillary packages.
- Creation of Occasion of Service encounters by ancillary packages such as Laboratory and Radiology via manual data entry and data passed to PCE/Visit Tracking from ancillary packages.
- Creation of Stop Code encounters via manual data entry. This type of encounter will be discontinued effective 10/1/96.
- Creation of historical encounters for clinically significant data that is NOT used for billing or workload purposes. These encounter entries are done via manual data entry.

## Appendix B - Orientation of MAS Staff to PCE

Orient your MAS users to changes in their Appointment Management and Disposition functionality resulting from PCE/Scheduling integration.

### **Dispositions**

Create a DISPOSITION CLINIC for each division in your facility using the "Set Up a Clinic" option on the Scheduling Supervisor Menu.

- If you are a multi-divisional facility and you want to credit disposition workload for each division, set up a DISPOSITION CLINIC for each division. Make sure you define each DISPOSITION CLINIC so that it is easily associated with the division for which you want to credit workload.
- If you are a single-division facility, you should define only one DISPOSITION CLINIC.
- The DISPOSITION CLINICS are *only* used with Dispositions.
- PCE recommends creating a clinic defined as Disposition, with a Stop Code number of 102. This clinic should be used with all dispositions.
- Use "PCE Edit Disposition Clinics" option located on the "PCE Site Parameter Menu" to enter the DISPOSITION CLINICS that were defined for use with Dispositions for your facility. The purpose of this is to restrict the Hospital Location for a Disposition to DISPOSITION CLINICS only.
- In single-division facilities, the hospital location for Dispositions is stuffed automatically, and you are not prompted to select a DISPOSITION HOSPITAL LOCATION.

### ***PCE Edit Disposition Clinics Example:***

```
Select PCE Site Parameter Menu Option: PCE Edit Disposition Clinics
Select PCE PARAMETERS ONE: 1
Select DISPOSITION HOSPITAL LOCATIONS: ?
  Answer with DISPOSITION HOSPITAL LOCATIONS
Choose from:
  DISPOSITION 1
  DISPOSITION 2
  You may enter a new DISPOSITION HOSPITAL LOCATIONS, if you wish
  Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
  Do you want the entire 58-Entry HOSPITAL LOCATION List? n
Select DISPOSITION HOSPITAL LOCATIONS: DISPOSITION 1
```

## Checkout Interview

The Checkout Interview has been changed by PCE to comply with new requirements that every encounter must have a provider, diagnosis, and procedure associated with it. You still enter the checkout information through the same menu and options, but the appearance on your computer screen changes when you get to the prompts relating to the new requirements.

You are prompted to enter Provider (and to designate if it's the Primary Provider), Service-connection status, Diagnosis (you must designate a primary diagnosis), and Procedure (or CPT codes). You may also designate if the Diagnosis should be added to the patient's Problem List.

A provider key isn't required for the providers entered here.

**REMEMBER:** Entering one or two question marks provides help (including lists of acceptable CPT codes, Diagnoses, and Stop Codes) on how to respond to prompts.

*Steps to use this option:*

### 1. Select Checkout from the Appointment Manager Menu and select the appointment you want to check out.

Appt Mgt Module			Jul 29, 1996 17:54:16		Page: 1 of 2	
Patient: OUTPATIENT,EDNA (6641)			Outpatient			
Total Appointment Profile			06/29/96 thru 04/24/99			
Clinic		Appt Date/Time		Status		
1	Cardiology	Jul 09, 1996	09:00	No Action Taken		
2	Diabetes Clinic	Jul 18, 1996	16:48	Action Req/Checked Out		
3	Old	Jul 18, 1996	16:53	Checked Out		
4	Cardiology	Jul 22, 1996	09:00	Checked Out		
5	Diabetes Clinic	Jul 22, 1996	11:00	Checked Out		
6	Cardiology	Jul 23, 1996	09:00	No Action Taken		
+ Enter ?? for more actions						
CI	Check In	PT	Change Patient	CO	Check Out	
UN	Unscheduled Visit	CL	Change Clinic	EC	Edit Classification	
MA	Make Appointment	CD	Change Date Range	PR	Provider Update	
CA	Cancel Appointment	EP	Expand Entry	DX	Diagnosis Update	
NS	No Show	AE	Add/Edit	DE	Delete Check Out	
DC	Discharge Clinic	RT	Record Tracking	CP	Procedure Update	
AL	Appointment Lists	PD	Patient Demographics			
Select Action: Next Screen// CO=6 Check Out						

**NOTE:** The response CO=6 above is a shortcut to selecting the action Check-Out (CO) and then selecting which appointment to do the Checkout on. If you only entered CO, you would then be prompted to select an appointment.

## 2. Answer prompts about follow-up appointment, check-out date and time, and classification.

```
6      Cardiology                Jul 23, 1996 09:00    No Action Taken
Do you wish to make a follow-up appointment? YES// NO
Check out date and time:  NOW//    (JUL 29, 1996@17:54)

--- Classification --- [Required]

Was treatment for SC Condition? NO
Was treatment related to Agent Orange Exposure? NO
Was treatment related to Ionizing Radiation Exposure? NO
Was treatment related to Environmental Contaminant Exposure? NO
```

***You now see the new screens from PCE.***

## 3. Enter all providers associated with this encounter.

One primary provider must be designated for each encounter.

```
PAT/APPT/CLINIC:  OUTPATIENT,EDNA  JUL 23, 1996@09:00          CARDIOLOGY
PROVIDER:  ...There is 1 PROVIDER associated with this encounter.
Previous Entry:  TEDD,DR_____
- - - - - E N C O U N T E R   P R O V I D E R S   - - - - -
No.  PROVIDER
1    TEDD,DR*                PRIMARY

Enter PROVIDER:  DOCTOR,DR
```

## 4. Enter the diagnoses. Specify which is the primary diagnosis for this encounter, and if it should be added to the Problem List.

```
PAT/APPT/CLINIC:  OUTPATIENT,EDNA  JUL 23, 1996@09:00          CARDIOLOGY
ICD CODE:  V70.3  --MED EXAM NEC-ADMIN PURP          PRIMARY
- - - - - E N C O U N T E R   D I A G N O S I S   (ICD9 CODES) - - - - -
No.  ICD      DESCRIPTION
No DIAGNOSIS for this Encounter.

Enter Diagnosis :  V70.3--MED EXAM NEC-ADMIN PURP

ONE primary diagnosis must be established for each encounter!
Is this the PRIMARY DIAGNOSIS for this ENCOUNTER? YES//  [ENTER]

Enter NEXT Diagnosis:  [ENTER]
Would you like to add this Diagnosis to the Problem List? NO/ /  YES

Enter PROVIDER associated with PROBLEM:  TEDD,DR  //  [ENTER]
```

**NOTE:** If more than one diagnosis is entered, you are only prompted once, at the end, to add any of them to the Problem List.

PAT/APPT/CLINIC: OUTPATIENT, EDNA JUL 29, 1996@18:08 ADMITTING AND SCREEN				
ICD CODE: ...There is 1 PROVIDER associated with this encounter.				
Previous Entry: 557.9				
<hr/>				
- - ENCOUNTER DIAGNOSIS (ICD9 CODES) - -				
No.	ICD	DESCRIPTION		
1	446.1*	MUCOCUTAN LYMPH NODE SYN		
2	557.9*	VASC INSUFF INTEST NOS		
3	227.0*	BENIGN NEOPLASM ADRENAL	PRIMARY	
Enter NEXT Diagnosis: [ENTER]				
Would you like to add any Diagnoses to the Problem List? NO// YES				
Select 1 or several Diagnoses (eg 1,3,4,7,3-6,2-5): 1				
Enter PROVIDER associated with PROBLEM: DEFA,TANA // [ENTER]				

### 5. Next enter the procedure(s) performed.

PAT/APPT/CLINIC: OUTPATIENT, EDNA JUL 23, 1996@09:00 CARDIOLOGY				
PROVIDER: ...There is 1 PROVIDER associated with this encounter.				
<hr/>				
- - ENCOUNTER PROCEDURES (CPT CODES) - -				
No.	CPT CODE	QUANTITY	DESCRIPTION	PROVIDER
<hr/>				
Enter PROCEDURE (CPT CODE): 22600-- NECK SPINE FUSION				
How many times was this procedure performed: 1// [ENTER]				
Enter PROVIDER associated with PROCEDURE: TEDD,DR // DEFT,TANYA				

### You may enter more procedures, along with the associated provider.

PAT/APPT/CLINIC: OUTPATIENT, EDNA JUL 23, 1996@09:00 CARDIOLOGY				
PROVIDER: ...Enter the provider associated with the CPT'S.....				
CPT: ...There is 1 PROCEDURE associated with this encounter.				
<hr/>				
- - ENCOUNTER PROCEDURES (CPT CODES) - -				
No.	CPT CODE	QUANTITY	DESCRIPTION	PROVIDER
1	22600*	1	NECK SPINE FUSION	DEFT,TANYA
<hr/>				
Enter NEXT PROCEDURE (CPT CODE): [ENTER]				

### 6. To delete a Provider, Diagnosis, or Procedure, enter the @ symbol and the number of the item to be deleted (e.g. @1).

## 7. You are then taken back to the Scheduling screens.

<b>Check Out</b>	<b>Jul 29, 1996 18:12:52</b>	<b>Page: 1 of 2</b>
Patient: OUTPATIENT,EDNA (6641)		Clinic: ADMITTING AN
Disposition Date/Time: Jul 29, 1996 18:08		Checked Out: YES
<b>CLASSIFICATION</b> [Required]		
1	Treatment for SC Condition: YES	
2	Agent Orange Exposure: Not Applicable	
3	Ionizing Radiation Exposure: Not Applicable	
4	Environmental Contaminants: Not Applicable	
<b>PROVIDER</b> [Required]		<b>DIAGNOSIS</b> [Required]
1	DEFA,TANA	1 446.1 MUCOCUTAN LYMPH NODE SYN
		2 557.9 VASC INSUFF INTEST NOS
		3 227.0 BENIGN NEOPLASM ADRENAL
+ Enter ?? for more actions		
CD (Check Out Date)	EC Edit Classification	PD Patient Demographics
AP Appointment	PR Provider Update	RT Record Tracking
DC Discharge Clinic	DX Diagnosis Update	CP Procedure Update
AE Add/Edit	IN Interview	
Select Action: Next Screen// DX Diagnosis Update		

**NOTE: If you don't answer the Procedure prompt when you're using the Add/Edit action to add a Standalone Encounter, you will be prompted for Stop Code (you can only add one Stop Code at a time). If you don't enter anything at the Procedure or Stop Code prompts , you are prompted to delete the encounter.**

<b>PAT/APPT/CLINIC:</b> OUTPATIENT,EDNA JUL 29, 1996@13:00	<b>HAND</b>
PROVIDER: ...Enter the provider associated with the CPT'S. ....	
CPT: ...There are 0 PROCEDURES associated with this encounter.	
<b>- - ENCOUNTER PROCEDURES (CPT CODES) - -</b>	
No. CPT CODE	QUANTITY DESCRIPTION PROVIDER
No CPT CODES for this Encounter.	
Enter PROCEDURE (CPT CODE): [ENTER]	

<b>PAT/APPT/CLINIC:</b> OUTPATIENT,EDNA JUL 29, 1996@13:00	<b>HAND</b>
STOP CODE: ..There are 0 STOP CODES associated with this ENCOUNTER	
<b>- - ENCOUNTER STOP CODES - -</b>	
No. CODE	DESCRIPTION
No STOP CODE for this ENCOUNTER.	
Enter a STOP CODE: [ENTER]	



You Must have a STOP CODE or a PROCEDURE to complete this action.  
Do you want to delete this encounter? NO// **YES**

## Online Help for Checkout Interview

Extensive help is available at all prompts within the Checkout Interview. The examples below demonstrate the layered structure for getting more detailed help.

NOTE that the help appears above the prompt.

### Examples of help at the Provider prompt:

PAT/APPT/CLINIC: OUTPATIENT,EDNA JUL 29, 1996@13:00 HAND  
PROVIDER: ...There is 1 PROVIDER associated with this encounter.

- - ENCOUNTER PROVIDERS - -

No. PROVIDER

1 TEDD,DR PRIMARY

Enter a PROVIDER associated with this patient ENCOUNTER.

You can enter partial names to receive a short list.

Above is a list of PROVIDERS already entered. If there are any additional ones, they should be entered at this time.

\* indicates that the entry has been visited during this session.  
For more detailed HELP and selection lists enter ??

Enter PROVIDER: ?

- - ENCOUNTER PROVIDERS - -

To receive detailed help for ADD or DELETE enter the following:

- A to get help on how to ADD providers.
- D to get help on how to DELETE providers.
- E to get help on how to EDIT providers.

To receive more SELECTION LISTS enter the following:

- 1 to get a list of ALL active providers.
- 2 to get a list of CLINIC providers.
- 3 to get a list of ENCOUNTER FORM providers.

Enter '^' to leave HELP CENTER

Enter a letter or number for additional help: **A**

**PAT/APPT/CLINIC: OUTPATIENT,EDNA JUL 29, 1996@13:00**

PROVIDER: ...There is 1 PROVIDER associated with this encounter.

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- - E N C O U N T E R P R O V I D E R S - -

To ADD a PROVIDER enter one of the following:

PROVIDER NAME (eg. SMITH,VAUGHN)

PARTIAL LAST NAME of the PROVIDER (eg. SM or SMITH)

Enter '^' to leave HELP CENTER

Enter a letter or number for additional help: **1**

**PAT/APPT/CLINIC: OUTPATIENT,EDNA JUL 29, 1996@13:00**

PROVIDER: ...There is 1 PROVIDER associated with this encounter.

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HELP SCREEN - - A L L P R O V I D E R S - -

ITEM NAME

1	ACCOUNT,CHIEF
2	ALERT,PROVIDER
3	ALLERGY,USER
4	ALLERGY,VERIFIER
5	BEAUCHAMP,CHUCK
6	BUDGET,ANALYST
7	CANAVAN,MATHEW
8	CARVER,BEN
9	CHANNELL,DEBBIE
10	CLERK,CP

Enter '^' to quit, '-' for previous page.

Select a single 'ITEM NUMBER' or 'RETURN' to continue: **^**